

EXTENSIONS OF REMARKS

HONORING DR. RALPH D. FEIGIN
FOR BEING APPOINTED TO THE
BOARD OF GOVERNORS

HON. KEN BENTSEN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Monday, October 16, 2000

Mr. BENTSEN. Mr. Speaker, today I honor Dr. Ralph D. Feigin, for being appointed to the Board of Governors at the National Institutes of Health and Warren Grant Magnuson Clinical Center. This appointment acknowledges Dr. Feigin's outstanding contributions in pediatric medicine for more than three decades.

Indeed this is an honor for the internationally renowned expert in pediatric infectious disease, who has published over 400 articles in chapters and books. The function of the board is a very important one, to advise, consult, and make recommendations to the Director of the NIH and the Director of the Clinical Center on matters of policy including the approval and development of a strategic plan and the annual budget. Members of the Board of Governors are chosen for their knowledge and expertise in health care governance and management, operational aspects of academic health care centers, and clinical research. Dr. Feigin has served since 1977, as the J.S. Abercrombie Professor of Pediatrics and Chairman of the Department of Pediatrics at the Baylor College of Medicine. While sharing knowledge with residents and cultivating their performances, he is still dedicated to his patients and to his daily work at Texas Children's Hospital.

A native of New York City, Dr. Feigin graduated from Columbia College with a B.A. in 1958. He received his Medical Degree from Boston University School of Medicine in 1962. Dr. Feigin completed his Pediatric Internship at the Boston City Hospital in 1963.

Dr. Feigin is known throughout the Texas Medical Center Community as a remarkable doctor and dedicated leader, who views his students as extended family. Each month he invites students celebrating birthdays to his home for a seated dinner and birthday cake baked by his wife Judith. Although his administrative duties consume much of his time, he starts each morning making rounds with residents, reviewing material, and sharing his knowledge of pediatric medicine that has earned him a distinguished reputation. From 1987 to 1989 he served as Executive Vice President of Texas Children's Hospital. In addition, he is Physician-in-Chief Pediatric Services, Ben Taub General Hospital and Chief of the Pediatric Service, The Methodist Hospital, also of my district.

Mr. Speaker, I wish to congratulate Dr. Feigin on this appointment and his many years of dedication to pediatric medicine. His achievements are an inspiration to us all.

CONFERENCE REPORT ON H.R. 4205,
FLOYD D. SPENCE NATIONAL DE-
FENSE AUTHORIZATION ACT FOR
FISCAL YEAR 2001

SPEECH OF

HON. MIKE THOMPSON

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 11, 2000

Mr. THOMPSON of California. Mr. Speaker, I rise in support of the conference report to accompany H.R. 4205, the National Defense Authorization Act.

As a conferee, I first would like to thank the Speaker for appointing me and to thank both Chairman SPENCE, and Ranking Member SKELTON, for affording me many opportunities to influence the conference deliberations and shape a number of provisions. It was an enlightening experience and I look forward to future opportunities to work with them and my other colleagues to provide for a strong national defense.

Mr. Speaker, of particular note are the quality of life improvements the conference report makes for both active duty and military retirees. Representing a large community on and around Travis Air Force Base, I know that many of these improvements are long overdue. The improvements in health care, especially access for retirees, will provide needed reassurance to those who serve our Nation in uniform.

Mr. SKELTON dubbed this year as the "year of military health care." I ask my colleagues to note the significant improvements to the TRICARE health care system for our active duty, retirees and their families. The conference report eliminates co-payments for active duty family members in TRICARE PRIME, so those active duty family members are treated fairly and equitably. It allows family members to participate in TRICARE Prime Remote, so that those who live far from a military base, including significant numbers in northern California, have the same access to health care. It authorizes reimbursement for travel expenses when families must travel long distances to see a specialist. It reduces unnecessary referral requirements to improve access to care. And, it establishes a permanent chiropractic benefit for our active duty personnel.

As I mentioned, the conference report honors the commitment to our military retirees and their families and restores access to lifetime military health care. It establishes a pharmacy benefit that allows retirees and their dependents to obtain drugs through the National Mail Order Pharmacy, a network pharmacy or a non-network pharmacy. No matter where you live access to pharmaceuticals will no longer be an issue.

The conference report also reduces the catastrophic cap for out-of-pocket expenses from \$7,500 to \$3,000. It adopts the House-passed

provision extending the TRICARE Senior Prime Program, more commonly known as Medicare Subvention. As a result, military retirees will have one of the best health care programs in the country.

The conference report includes a number of initiatives to improve the quality of life for our service members and help the Services in their recruitment and retention efforts. It provides a 3.7 percent pay raise for all military personnel and includes a targeted pay raise for mid-grade enlisted personnel.

Most important for many of the active duty service men and women who live off-base, the conference report eliminates the cap and reduces the out-of-pocket housing costs for our members to 14.5 percent. To improve the quality of life for our junior enlisted families the conference report increases housing standards and authorizes \$157 million more than requested for family housing, including the construction of 64 family housing units at Travis Air Force Base.

These are several of the initiatives I am pleased to have played a role in fashioning and I would like to thank my subcommittee chairmen, STEVE BUYER and JOEL HEFLEY, for the opportunity to work with them and the other conferees on these personnel and military construction issues.

In fashioning this House-Senate compromise, there are, of course, disappointments. I regret conferees did not accept the provision I authored to require the Department of Defense to collect and analyze the DNA of violent offenders and to provide those analyses to the Department of Justice CODIS database. While I don't disagree with their view that such a requirement should be government-wide, the bill the House passed imposing this requirement is likely to stall in the Senate. As a result, we will have lost as much as a year of using this DNA in criminal investigations.

I also regret that the Senate-passed hate crimes measure was dropped from the conference report.

I am also disappointed with a Senate-passed provision directing the Departments of Defense and Energy to study ways to "defeat hardened and deeply buried targets." Though slightly modified from the original, the language still permits limited research and development, which could lead to a new low-yield nuclear weapon with earth-penetrating capabilities.

As I expressed to other conferees, my concern with developing such a weapon is that it is likely to encourage military and political leaders to think more readily about using nuclear weapons. In my view, we should not lower this threshold or make nuclear weapons a more acceptable choice in war. In addition, development of such a weapon is contrary to our Nation's goals of reducing and eventually eliminating nuclear weapons. To begin development and stockpiling of a new nuclear

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